

Mental Status Exam

Appearance dress, grooming, posture, poise

Behavior mannerisms, gestures, tics, tremors, agitations, hyperactivity, combativeness, hypoactivity (catatonia or psychomotor retardation)

Attitude cooperative, attentive, guarded, hostile, apathetic, seductive, friendly, frank, defensive, evasive, perplexed. Note rapport, eye contact

Affect appropriate, inappropriate, constricted, blunted, flat, labile

Speech quantity, quality, rate, tone, volume

Thought content bizarre, systematized, mood congruent, nihilistic, somatic, paranoid, infidelity, erotomania, pseudologia phantastica, paranoia, obsessions, compulsions, phobias. Must comment on SI/HI, A/V hallucinations (also tactile or olfactory).

Thought process goal directed, circumstantial, tangential, loose associations, flight of ideas, word salad

Sensorium and cognition alert, drowsy, somnolence, clouding, stupor, delirium ('lytes), coma, mini-mental, fund of knowledge, proverbs (milk's on the counter, fridge is open, what would you do?)

Impulse control awareness of socially appropriate behavior

Judgement Does the patient understand the consequences of their actions? responsiveness to social cues. can the patient hypothesize their response to imaginary situations.

Medications & Allergies

SI/HI plan, intent, lethality, victims identified

Depression SIG: ECAPS Sleep, Interest, Guilt, Energy, Concentration, Appetite, Suicide

Suicide SAD PERSONS Sex (♂) Age, Depression, Previous attempts, Ethanol, etc, Reality testing, Social support, Organized plan, No spouse, Sickness.

Suicide prevention Friend to trust · antisuicide contract · 24hr suicide watch · treatment programs

Social History Developmental history · Education · Military · relationships · Living situation · Financial support · Available emotional support · EtOH, smoking, drugs · Occupational history · Hobbies

Mini-mental

Orientation

5 — What is the (year, season, month, day, date)

5 — Where are we (state, county, city, hospital, floor)

Registration

3 — Can you remember these three objects for me? I'll ask you in a few minutes: _____ . Ensure immediate recall and try until immediate recall is accurate. Count attempts.

Attention & Calculation

5 — count by 7s backward from 100.

Recall

3 — ask for the three objects above

Language

2 — offer two objects and ask what for their names

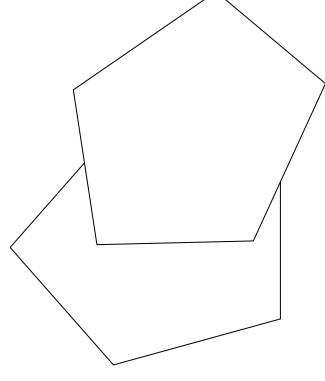
1 — repeat the following: "no ifs, ands, or buts"

3 — follow a 3 step command: take this paper, fold it in half, and set it on floor.

1 — read and obey this command "Close your eyes"

1 — write a sentence

1 — Copy the following design



Total _____

Rules of group Confidentiality · Raise your hand · Respect · No meds or discharge dates · If you leave, don't come back

Axis I Disorders Usually diagnosed in infancy, childhood, or adolescence

Delerium, Dementia, Amnestic and other cognitive disorders
Somatoform disorders
Factitious disorders
Mental disorders due to medical condition
Substance-related disorders
Schizophrenia & other psychotic disorders
Mood disorders
Anxiety disorders

Axis II Personality Disorders Includes mental retardation

Paranoid personality disorder
Schizoid personality disorder
Schizotypal personality disorder

Antisocial personality disorder
Borderline personality disorder
Histrionic personality disorder
Narcissistic personality disorder

Axis III General Medical Conditions

Axis IV Psychosocial & Environmental

Primary support group
Social environment
Educational
Occupational
Housing

Economic
Access to health care services
Legal, including criminal
Other

Legal Statutes

Informal Voluntary Admission May leave at any time

Formal Voluntary Admission Must understand (1) requesting admission to psych hospital, (2) is making application for admission, and (3) involuntary status and procedure for discharge. Must be released within 72 hours of release request.

Non-contested Admission Patient does not object to admission; written consent not required b/c patient doesn't understand (1), (2), or (3) above.

Order for Protective Custody Within 8 hours the patient must be examined and released or be put on a non-contested admission or an emergency certificate

Physician's Emergency Certificate Good for 72 hours

Coroner's Emergency Certificate Good for 15 days

Judicial Commitment

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Axis V Global Assessment of Function

- 100 Superior functioning in a wide range of activities, life's problems never seem to get out of hand, sought out by others because of their many positive qualities. No symptoms.
- 91 Absent or minimal symptoms (mild anxiety before an exam), good functioning in all areas, interested and involved in a wide range of activities, socially effective, generally satisfied with life, no more than everyday problems or concerns (an occasional argument with family members)
- 80 Symptoms, if present, are transient and expectable reactions to psychosocial stressors (difficulty concentrating after family argument); no more than slight impairment in social, occupational, or school functioning (temporarily falling behind in schoolwork).
- 71 **Some mild symptoms** (depressed mood and mild insomnia) OR some difficulty in social, occupational, or school functioning (occasional truancy, or theft within the household), but generally functioning pretty well, has some meaningful interpersonal relationships.
- 60 **Moderate symptoms** (flat affect and circumstantial speech, occasional panic attacks) OR moderate difficulty in social, occupational, or school functioning (few friends, conflicts with peers or co-workers).
- 50 **Serious symptoms** (suicidal ideations, severe obsessional rituals, frequent shoplifting) OR any serious impairment in social, occupational, or school functioning (no friends, unable to keep a job)
- 40 Some impairment in reality testing or communication (speech is at times illogical, obscure, or irrelevant) OR major impairment in several areas, such as work or school, family relations, judgement, thinking, or mood (depressed man avoids friends, neglects family, and is unable to work; child frequently beats up younger children, is defiant at home, and is failing at school).
- 30 Behavior is considerably influenced by delusions or hallucinations OR serious impairment in communication or judgement (sometimes incoherent, acts grossly inappropriately, suicidal preoccupation) OR inability to function in almost all areas (stays in bed all day; no job, home, or friends).
- 20 Some danger of hurting self or others (suicide attempts without clear expectation of death; frequently violent, manic excitement) OR occasionally fails to maintain minimal personal hygiene (smears feces) OR gross impairment in communication (largely incoherent or mute).
- 10 Persistent danger of severely hurting self or others (recurrent violence) OR persistent inability to maintain minimal personal hygiene OR serious suicidal act with clear expectation of death
- 0 Inadequate information